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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	08/976,820
Filing Date	November 24, 1997
First Named Inventor	Jorn Leiber
Group Art Unit	TBA
Examiner Name	TBA

Attorney Docket Number Beiersdorf 481-KGB

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		
<input checked="" type="checkbox"/> Extension of Time Request		
<input type="checkbox"/> Express Abandonment Request		
<input type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kurt G. Briscoe SPRUNG KRAMER SCHAEFER & BRISCOE
Signature	
Date	July 31, 1998

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name	Emily Riddock	Date	7/31/98
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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**FEE TRANSMITTAL**

Note: Effective October 1, 1997.
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1080.00)

Complete If Known

Application Number	08/976,820
Filing Date	November 24, 1997
First Named Inventor	Jorn Leiber
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METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 19-3869
Deposit Account Name SPRUNG KRAMER SCHAEFER & BRISCOE

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION**1. FILING FEE**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	790	201 395 Utility filing fee	
106	330	206 165 Design filing fee	
107	540	207 270 Plant filing fee	
108	790	208 395 Reissue filing fee	
114	150	214 75 Provisional filing fee	
SUBTOTAL (1) (\$)			

2. CLAIMS

Total Claims	-20 =	Extra	Fee from below	Fee Paid
Independent Claims	- 3 =	X		
Multiple Dependent Claims		X		

Large Entity Small Entity

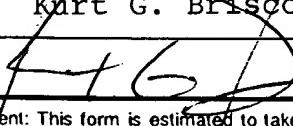
Fee Code (\$)	Fee Code (\$)	Fee Description	
103	22	203 11 Claims in excess of 20	
102	82	202 41 Independent claims in excess of 3	
104	270	204 135 Multiple dependent claim	
109	82	209 41 Reissue independent claims over original patent	
110	22	210 11 Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)			

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	130.00
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for reexamination	
112	920*	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	400	216 200 Extension for reply within second month	
117	950	217 475 Extension for reply within third month	
118	1,510	218 755 Extension for reply within fourth month	
128	2,060	228 1,030 Extension for reply within fifth month	
119	310	219 155 Notice of Appeal	
120	310	220 155 Filing a brief in support of an appeal	
121	270	221 135 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,320	241 660 Petition to revive - unintentional	
142	1,320	242 660 Utility issue fee (or reissue)	
143	450	243 225 Design issue fee	
144	670	244 335 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	
146	790	246 395 Filing a submission after final rejection (37 CFR 1.129(a))	
149	790	249 395 For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____			
Other fee (specify) _____			
Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$ 1080.00)			

SUBMITTED BY

Typed or Printed Name Kurt G. Briscoe

Signature 

Complete (if applicable)

Reg. Number	33,141
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Date	7/31/98	Deposit Account User ID	
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

BEST AVAILABLE COPY



Beiersdorf 481-KGB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : JÖRN LEIBER ET AL.
Serial No. : 08/976,820
Filed : November 24, 1997
For : USE OF AN ADHESIVE TAPE SECTION
Group Art Unit : N/A
Examiner : N/A

July 31, 1998

BOX MISSING PART
Assistant Commissioner for Patents
Washington, D.C. 20231

S I R:

COMMUNICATION RE: FILING OF DECLARATION
ON A DATE LATER THAN THE FILING
DATE OF THE APPLICATION

This is in response to the Notice to File Missing Parts of Application under 37 CFR 1.53(d) dated March 5, 1998 in the above-identified application. A copy of said Notice is attached hereto.

It is requested that the papers submitted herewith
be joined up with the papers previously filed in this
Application.

Applicant is:

[] a small entity [] verified statement attached
[] verified statement filed

[X] other than a small entity.

It is requested that the surcharge for the filing
of the Declaration be charged to the undersigned's Deposit

Account No. 19-3869. Please charge:

[] \$ 65.00 for small entity

[X] \$130.00 for other than small entity.

An extra copy of this communication is appended hereto for accounting purposes.

CONDITIONAL PETITION FOR EXTENSION OF TIME

If any extension of time for this response is required, applicant requests that this be considered a petition therefor. Please charge the required Petition fee to Deposit Account No. 19-3869.

ADDITIONAL FEE

Please charge any insufficiency of fees, or credit any excess to our Deposit Account No. 19-3869.

Respectfully submitted,
SPRUNG KRAMER SCHAEFER & BRISCOE

By: 

Kurt G. Briscoe
Reg. No. 33,141

660 White Plains Road
Tarrytown, N.Y. 10591
(914) 332-1700

I hereby certify that this correspondence is being deposited with the United States Postal Services as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231 on July 31, 1998

SPRUNG KRAMER SCHAEFER & BRISCOE

By 

Date July 31, 1998

AUG 03 1998

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER

FILING/RECEIPT DATE

FIRST NAMED APPLICANT

ATTORNEY DOCKET NO./TITLE

08/976,820

11/24/97

LEIBER

BEIERSDORF-4

SPRUNG KRAMER SCHAEFER AND BRISCOE
660 WHITE PLAINS ROAD
TARRYTOWN NY 10591-5144

NOT ASSIGNED

3612

DATE MAILED:

03/05/98

NOTICE TO FILE MISSING PARTS OF APPLICATION

Filing Date Granted

An Application Number and Filing Date have been assigned to this application. However, the items indicated below are missing. The required items and fees identified below must be timely submitted ALONG WITH THE PAYMENT OF A SURCHARGE for items 1 and 3-6 only of \$ 130 for a large entity small entity in compliance with 37 CFR 1.27. The surcharge is set forth in 37 CFR 1.16(e). Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required above to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

If all required items on this form are filed within the period set above, the total amount owed by applicant as a
 large entity *small entity (verified statement filed)*, is \$ 130.

1. The statutory basic filing fee is:

- missing.
- insufficient.

Applicant must submit \$ _____ to complete the basic filing fee and/or file a verified small entity statement claiming such status (37 CFR 1.27).

2. Additional claim fees of \$ _____, including any multiple dependent claim fees, are required.
Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

- is missing.
- does not cover the newly submitted items.
- does not identify the application to which it applies.
- does not include the city and state or foreign country of applicant's residence.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are:

- missing.
- by a person other than inventor or person qualified under 37 CFR 1.42, 1.43, or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:
 08/11/1998 TDADE1 00000024 193869 08976820

01 FC:105 *An oath or declaration listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.*

6. A \$ _____ processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application does not comply with the Sequence Rules.

See attached "Notice to Comply with Sequence Rules" 37 CFR 1.821-1.825.

9. OTHER:

Direct the response and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the response.

Debra H. Ham
Customer Service Center

Initial Patent Examination Division (703) 308-1202